PART B - FEE(S) TRANSMITTAL

Complete and se		her with	<i>5</i> 2/	•	P.C Ale	il Stop ISSUE I mmissioner for). Box 1450 xandria, Virgin 1)-273-2885	Latents	3-1450		
INSTRUCTIONS: This	s form should be seed	or transm	itting the ISSI		-	•	ed). Block	s I through 5 sh	ould be completed when	
appropriate. All further indicated unless correct	correspondence includi- ted below or directed of	ig the Pat	ont edvance of Block I, by (rders and notification a) specifying a new co	of n	naintenance fees wil pondence address; a	ll be maile ind/or (b)	ed to the current of indicating a separate	could be completed when correspondence address a rate "FEE ADDRESS" fo	
maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
22434		/2007					•	failing or Transr	nission	
BEYER WEA P.O. BOX 7025 OAKLAND, C		I her State addr trans	hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile ransmitted to the USPTO (571) 273-2885, on the date indicated below.							
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APPLICATION NO.	FILING DATE			FIRST NAMED INVENTOR		1	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/731,965	10/731,965 12/09/2003			Hsin-Ho Wu		NSC1P287/P05765 6419			6419	
TITLE OF INVENTION	N: LASER TRIM AND C	OMPENS	ATION METH	IODOLOGY FOR PA	SSIV	ÆLY ALIGNING O	PTICAL 1	TRANSMITTER		
APPLN. TYPE	SMALL ENTITY	ISSU	E FEE DUB	PUBLICATION FEE D	UB	PREV. PAID ISSUE	FEB TO	TAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1	91-400 1 440	\$300		\$0		\$1700- \$1,740	12/19/2007	
EXAMINER		ART UNIT		CLASS-SUBCLASS				, .		
FLORES RU	2828	372-038100								
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
•	ND RESIDENCE DATA	TO BE E	PRINTED ON	<u> </u>		·				
PLEASE NOTE: Un	less an assignee is ident th in 37 CFR 3.11. Comp	ified belov	ν. πο assignee	data will appear on the	ne pa gan a	atent. If an assignee		ied below, the do	cument has been filed for	
National Semiconductor Corporation Santa Clara, CA										
Please check the appropr	riate assignee category or	categories	(will not be pr	rinted on the patent):	0	Individual 🗷 Corp	poration or	other private grou	up entity Government	
4a. The following fee(s)	b. Payment of Fcc(s): (se filrst reapply any	previousi	y paid Issue fee s	hown above)				
Issue Fee	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.									
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any definition overpayment, to Deposit Account Number 50-0388 (enclose and									iciency, or credit any extra copy of this form).	
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NOTE: The Issue Fee an	as SMALL ENTITY state and Publication Fee (if req	uired) will	not be accepte	b. Applicant is no d from anyone other th					R 1.27(g)(2). sassignee or other party in	
interest as shown by the	records of the United Sta	tes Patent	and Trademark	Office.						
Authorized Signature			A			Date No	vember	29, 2007		
Typed or printed name						Registration No.				
Alexandria, Virginia 223	/irgmia 22313-1430. DC	INOI SE	יאט כפפז עא	COMPLETED FORM	3 10	INIS ADDRESS.	סו שמפא	Commissioner ic	by the USPTO to process), gathering, preparing, and e you require to complete tranent of Commerce, P.O. or Patents, P.O. Box 1450, number.	
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PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.